

Substitute for form 1449/PTO
(Revised 07/2007)

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet 1 of 1

Complete if Known

Application Number	10/556,711
Filing Date	November 13, 2006
First Named Inventor	Ichiro <i>et al.</i>
Art Unit	1653
Examiner Name	To Be Assigned
Attorney Docket Number	051009/303044

U. S. PATENT DOCUMENTS

Examiner Initials*	Cite No.	Document Number Number - Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear
	1	US- 5,693,757	12/02/1997	MacDonald et al.	The General Hospital Corp.
		US-			
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FOREIGN PATENT DOCUMENTS

Examiner Initials	Cite No.	Foreign Patent Document Country Code - Number Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	English Language Translation Attached

Examiner Signature		Date Considered	
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*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.